Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 APPLICATION AS FILED -- PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) FEE (\$) BASIC FEE (37 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(k), (i), or (m)) **EXAMINATION FEE** (37 CFR 1.16(o), (p), or (q)) **TOTAL CLAIMS** х = (37 CFR 1.16(i)) minus 20 = OR х = INDEPENDENT CLAIMS (37 CFR 1.16(h)) minus 3 = = х = х If the specification and drawings exceed 100 sheets of paper, the application size fee due **APPLICATION SIZE** is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING **PRESENT** NUMBER RATE (\$) ADDI-RATE (\$) ADDI-⋖ **EXTRA** AFTER PREVIOUSLY TIONAL TIONAL ENDMENT AMENDMENT PAID FOR FEE (\$) FEE (\$) Total Minus = (37 CFR 1.16(i)) х OR Independent (37 CFR 1.16(h)) Minus = х = = х OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE (\$) ADDI-RATE (\$) മ ADDI-**EXTRA AFTER PREVIOUSLY** TIONAL TIONAL ENDMENT AMENDMENT PAID FOR FEE (\$) FEE (\$) Total (37 CFR 1.16(i)) Minus Х OR Independent (37 CFR 1.16(h)) Minus = х = = OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
FC	R		NUMBE	R FILED		NUMBER E	EXTRA	Г	RATE	FEE	1	RATE	FEE
BASIC FEE					1	-		Ī		380.00	OR		760.00
то	TAL CLAIMS		/5 minus 20=			•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS 6 minus 3 = *						• 3			X39=		OR	X78=	234.
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	•
* If the difference in column 1 Is less than zero, enter "0" in column 2									TOTAL		OR	TOTAL	994
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL ENTITY			OTHER SMALL I	
ENT A		REM AF	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
AMENDMENT	Total	* 6	27	Minus	**	20	- 7		X\$ 9=		OR	X\$18=	126.
AME	Independent FIRST PRESE	*	9 NOEM	Minus	WANT DEAIR	<u> </u>	= 3		X39=		OR	X78=	234.
	FINOT FRESE	MIAIR	JN OF RIC	JETIFLE DE	ENL	DENT CLAIM			+130=		OR	+260=	
						•	• •	A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	366
			umn 1)				(Column 3)					:	•
AMENDMENT B		CI REN A AMEI			PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
	Total	* 5	13	Minus	**	27	=		X\$ 9=		OR	X\$18=	. /
AME	Independent	*	8	Minus	***	<u> </u>	= 4		X39=		OR	X78=	
	FIRST PRESE	NIAHC	IN OF MU	JLTIPLE DEI	ENL	DENT CLAIM		T	+130=		OR	+260=	
								Ar	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	-
		(Coli	umn 1)		(C	olumn 2)	(Column 3)	-					
AMENDMENT C		REM AF	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
	Total	. 7	25	Minus	**	27	<u>- 6</u>		X\$ 9=		OR	X\$18=	1
	Independent	*	8	Minus	***		= T	ľ	X39=		OR	X78=	
	FIRST PRESE	NIAIIC	IN OF MU	PLIPLE DEF	'ENC	PENT CLAIM	1	r	130-			+260=	-
	i the entry in colu f the "Highest Nu							┖	+130= TOTAL		OR OR	TOTAL	
***	f the "Highest Nu f the "Highest Nu The "Highest Num	mber Pro	eviously Pa	aid For" IN THI	S SP	ACE is less that	n 3, enter "3."	AL	DIT. FEE L d in the app	ropriate box	,	ADDIT, FEE l umn 1.	1